FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300055476 (4)

RICHARD J. LETO CORPORATION

Principal Place of Business Mailing Address 104 W SENECA AVE #14 1310 W HUMPHREY TAMPA FL 33612 TAMPA FL 33604				F LOBEIDDE IIM FAIDD IIIII A DIVI ABIII ABIII ABIII AINDI AIVII AINDI AIII INDIB AIII INDI
IAMINA FL 33004				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				08/05/1993
2. Principal Place of Business		2a. Mailing Address		4, FEI Number Applied For
21		26		59-3193628 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State	е	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. 🔀 Yes 🗌 No
	g. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent
	O, RICHARD		81 Name	
1310 W HUMPHREY 82 Street Add				dress (P.O. Box Number is Not Acceptable)
TAMPA FL 33604				
			83	
			84 City	85 Zip Code
]] , ,	 - _
office or r	to the provisions of Sections 607.05/ egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a	authorized by the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or posted name of registered as	and and the Bound orbits (NOT)	: Registered Agent signature requ	ired when renstating) DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Change Addition
NAME	LETO, RICHARD		1.2 NAME	_ • _
STREET ADDRESS	1310 W HUMPHREY		1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP	,
TITLE	IAMICATE	DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
			2. 4 CITY-ST-ZIP	
CITY-ST-ZIP		DELETE	3.1 TITLE	Change Addition
			3.2 NAME	
NAME			3.2 NAME 3.3 STREET ADORESS	
STREET ADDRESS			3.4. CITY- ST-ZIP	
CITY-ST-ZIP		DELETE	4.1 TITLE	Change Addilio
NAME		C DESCRI	4. 2 NAME	
TIVANE.			T. C. INDIVIL	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report Furue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee pripowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an atlachment with an additions.

4.3 STREE1 ADDRESS

5.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

11 30 64

3R2E034 (10/97)

Change

☐ Change

... Addition

☐ Addition

FILED

May 07 1998 8:00am

Secretary of State